

Fill in this information to identify the case

Debtor name	<u>The Longaberger Company</u>
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF TEXAS</u>
Case number (if known)	<u>18-32124-HDH</u>

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets -- Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

No. Go to Part 2.
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor			Current value of debtor's interest
2. Cash on hand			\$0.00
3. Checking, savings, money market, or financial brokerage accounts (Identify all)			
Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. Checking account <u>Century National Bank</u>	<u>Checking account</u>	<u>0 9 9 6</u>	\$0.00
3.2. Checking account <u>BBVA Compass</u>	<u>Checking account</u>	<u>0 7 3 8</u>	\$0.00
3.3. Checking account <u>BBVA Compass</u>	<u>Checking account</u>	<u>7 4 7 3</u>	\$0.00
3.4. Checking account <u>BBVA Compass</u>	<u>Checking account</u>	<u>7 5 1 1</u>	\$0.00
3.5. Checking account <u>BBVA Compass</u>	<u>Checking account</u>	<u>7 5 7 0</u>	\$0.00
3.6. Checking account <u>BBVA Compass</u>	<u>Checking account</u>	<u>9 2 8 4</u>	\$0.00

Debtor The Longaberger Company _____ Case number (if known) 18-32124-HDH _____
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15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:	% of ownership:	
15.1. <u>TMRCL Holding Co</u>	<u>100%</u>	<u>\$0.00</u>
15.2. <u>TMRCL Holding, LLC</u>	<u>100%</u>	<u>\$0.00</u>
15.3. <u>The Longaberger Company Canada</u>	<u>100%</u>	<u>\$0.00</u>

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$0.00

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

No. Go to Part 6.
 Yes. Fill in the information below.

General description	Date of the last physical inventory MM/DD/YYYY	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				

20. Work in progress

21. Finished goods, including goods held for resale

Baskets

See Attached Exhibit "A"

COGS is 23%. Assuming that, retail value is approximately

\$10,910,252. 06/20/2018 Cost Basis **\$2,509,358.00**

22. Other inventory or supplies

23. Total of Part 5

Add lines 19 through 22. Copy the total to line 84.

\$2,509,358.00

24. Is any of the property listed in Part 5 perishable?

No
 Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

No
 Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

No
 Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming or fishing-related assets (other than titled motor vehicles and land)?

No. Go to Part 7.
 Yes. Fill in the information below.

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General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops--either planted or harvested			
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
30. Farm machinery and equipment (Other than titled motor vehicles)			
31. Farm and fishing supplies, chemicals, and feed			
32. Other farming and fishing-related property not already listed in Part 6			
33. Total of Part 6.			\$0.00
Add lines 28 through 32. Copy the total to line 85.			
34. Is the debtor a member of an agricultural cooperative?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Is any of the debtor's property stored at the cooperative? <input type="checkbox"/> No <input type="checkbox"/> Yes		
35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Book value _____ Valuation method _____ Current value _____		
36. Is a depreciation schedule available for any of the property listed in Part 6?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
37. Has any of the property listed in Part 6 been appraised by a professional within the last year?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Part 7: Office furniture, fixtures, and equipment; and collectibles			
38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?	<input type="checkbox"/> No. Go to Part 8. <input checked="" type="checkbox"/> Yes. Fill in the information below.		
General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture	<u>Furniture and Equipment</u> _____ \$100,985.94		
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software			
42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
43. Total of Part 7.	Add lines 39 through 42. Copy the total to line 86. \$1,288,660.30		
44. Is a depreciation schedule available for any of the property listed in Part 7?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

No
 Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

No. Go to Part 9.
 Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

48. Watercraft, trailers, motors, and related accessories Examples: Boats
trailers, motors, floating homes, personal watercraft, and fishing vessels

49. Aircraft and accessories

50. Other machinery, fixtures, and equipment (excluding farm
machinery and equipment)

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$0.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

No
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

No
 Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

No. Go to Part 10.
 Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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55.1. Muskingum County, Ohio

APN 10-04-06-01-000

Land

Fee Simple

\$100,000.00

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$100,000.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

No
 Yes

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58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

No
 Yes

Part 10: Intangibles and Intellectual Property

59. Does the debtor have any interests in intangibles or intellectual property?

No. Go to Part 11.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets <u>Trademarks</u>			<u>\$15,000.00</u>
61. Internet domain names and websites <u>Domain Names</u>			<u>\$5,000.00</u>
62. Licenses, franchises, and royalties			
63. Customer lists, mailing lists, or other compilations <u>Customer Lists</u>			<u>\$20,000.00</u>
64. Other intangibles, or intellectual property			
65. Goodwill			
66. Total of Part 10.			<u>\$40,000.00</u>
Add lines 60 through 65. Copy the total to line 89.			
67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?			
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
69. Has any of the property listed in Part 10 been appraised by a professional within the last year?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

No. Go to Part 12.
 Yes. Fill in the information below.

71. Notes receivable

Description (include name of obligor)

Current value of debtor's interest

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72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

73. Interests in insurance policies or annuities

74. Causes of action against third parties (whether or not a lawsuit has been filed)

**JRJR33, Inc.d/b/a JRJR Networks v. Tamala Longaberger, Individually and as Trustee under the
Tamala L. Longaberger Revocable Trust Case # DC-16-12594. A copy of the Petition (w/o
exhibits) is attached Exhibit "B".**

\$10,000,000.00

Nature of claim Breach of Reps & Warranties

Amount requested \$10,000,000.00

**75. Other contingent and unliquidated claims or causes of action of every nature,
including counterclaims of the debtor and rights to set off claims**

76. Trusts, equitable or future interests in property

77. Other property of any kind not already listed Examples: Season tickets, country club membership

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$10,000,000.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

No
 Yes

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Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	<u>\$0.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$29,795.42</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$2,509,358.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$1,288,660.30</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....</i>	<u>→</u>	<u>\$100,000.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$40,000.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>+ \$10,000,000.00</u>	
91. Total. Add lines 80 through 90 for each column. 91a.	<u>\$13,867,813.72</u>	<u>+ 91b. \$100,000.00</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.....		<u>\$13,967,813.72</u>

Fill in this information to identify the case:

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United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF TEXAS</u>
Case number (if known)	<u>18-32124-HDH</u>

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A
Amount of claim
Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$13,864,989.00

Debtor The Longaberger Company

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Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

2.1	Creditor's name <u>JGB Collateral LLC</u>	Describe debtor's property that is subject to a lien <u>All Assets</u>	\$5,264,989.00	\$3,867,813.72
	Creditor's mailing address <u>2 Charles Street Westport CT</u>	Describe the lien <u>Agreement</u>		
		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Westport CT 06880			
	Creditor's email address, if known	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Date debt was incurred <u>10/19/2017</u>			
	Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.		
	_____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property?			
	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority.			

For Accounts Receivable: 1) JGB Collateral LLC. For The Longaberger Company Canada: 1) JGB Collateral LLC. For TMRCL Holding Co: 1) JGB Collateral LLC. For TMRCL Holding, LLC: 1) JGB Collateral LLC. For Baskets See Attached Exhibit "A" COGS is 23%. Assuming that: 1) JGB Collateral LLC; 2) Richmont Capital Partners. **For Furniture and Equipment:** 1) JGB Collateral LLC. For Software: 1) JGB Collateral LLC. For Trademarks: 1) JGB Collateral LLC. **For Domain Names:** 1) JGB Collateral LLC. For Customer Lists: 1) JGB Collateral LLC.

Debtor The Longaberger Company

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Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

2.2	Creditor's name <u>Richmont Capital Partners</u>	Describe debtor's property that is subject to a lien <u>All Assets</u>	\$8,600,000.00	\$2,509,358.00
	Creditor's mailing address <u>2950 North Harwood St. Suite 2200</u>	Describe the lien <u>Agreement</u>		
		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Dallas TX TX 75201	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply.		
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
		<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.		
		<input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.1</u>		

Fill in this information to identify the case:

Debtor	<u>The Longaberger Company</u>
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>	
Case number (if known)	<u>18-32124-HDH</u>

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or part.

If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

Total claim **Priority amount**

2.1	Priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		Basis for the claim:
	Date or dates debt was incurred	Is the claim subject to offset?
	Last 4 digits of account number	<input type="checkbox"/> No <input type="checkbox"/> Yes
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(_____)	

Debtor The Longaberger Company

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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>
<u>1099 Express Service Bureau LLC</u>		<input type="checkbox"/> Contingent
<u>512 Wood Lake Drive</u>		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Basis for the claim:		
<u>McQueeney</u> TX 78123		
Date or dates debt was incurred		Is the claim subject to offset?
<u>6/6/2017</u>		<input checked="" type="checkbox"/> No
Last 4 digits of account number		<input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>
<u>Accessa Coatings Solutions</u>		<input type="checkbox"/> Contingent
<u>1034 East New York Street</u>		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Basis for the claim:		
<u>Indianapolis</u> IN 46202		
Date or dates debt was incurred		Is the claim subject to offset?
<u>10/15/2017</u>		<input checked="" type="checkbox"/> No
Last 4 digits of account number		<input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>
<u>Action Temporary Services Inc</u>		<input type="checkbox"/> Contingent
<u>2239 Maple Avenue</u>		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Basis for the claim:		
<u>Zanesville</u> OH 47301		
Date or dates debt was incurred		Is the claim subject to offset?
<u>9/9/2017</u>		<input checked="" type="checkbox"/> No
Last 4 digits of account number		<input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>
<u>Advanced Flexible Composites</u>		<input type="checkbox"/> Contingent
<u>14 Walter Court</u>		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
Basis for the claim:		
<u>Lake in the Hills</u> IL 60156		
Date or dates debt was incurred		Is the claim subject to offset?
<u>12/3/2017</u>		<input checked="" type="checkbox"/> No
Last 4 digits of account number		<input type="checkbox"/> Yes

Debtor The Longaberger Company

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$52,000.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
Cleveland OH 44702			
Date or dates debt was incurred <u>1/1/2018</u>		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
Last 4 digits of account number _____			
3.6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$265.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
Mesquite TX 75149			
Date or dates debt was incurred <u>7/15/2015</u>		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
Last 4 digits of account number _____			
3.7	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$760.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
Warren RI 02885			
Date or dates debt was incurred <u>9/15/2016</u>		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
Last 4 digits of account number _____			
3.8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$22,265.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
New York City NY 10285			
Date or dates debt was incurred <u>12/1/2017</u>		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
Last 4 digits of account number _____			

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.9	Nonpriority creditor's name and mailing address <u>American Light Company Inc.</u> <u>122 Main Street</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$6,475.00</u>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Zanesville</u> <u>OH</u> <u>43701</u>			
Date or dates debt was incurred	<u>12/31/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.10	Nonpriority creditor's name and mailing address <u>American Producers Supply Co</u> <u>119 Second Street</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$2,202.00</u>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Marietta</u> <u>OH</u> <u>45750</u>			
Date or dates debt was incurred	<u>2/12/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.11	Nonpriority creditor's name and mailing address <u>American Wood Fibers, Inc.</u> <u>2500 Owens Road</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$200.00</u>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Circleville</u> <u>OH</u> <u>43113</u>			
Date or dates debt was incurred	<u>1/1/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.12	Nonpriority creditor's name and mailing address <u>Andrew Wolfe</u> <u>84 Amberly Road</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$2,474.00</u>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Granville</u> <u>OH</u> <u>43023</u>		<u>Wages, Salaries and Commissions</u>	
Date or dates debt was incurred	— — — —	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor The Longaberger Company

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Amount of claim

3.13	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$30,840.00
<u>Check all that apply.</u> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Cleveland</u> OH 44125			
Date or dates debt was incurred		<u>12/31/2017</u>	
Last 4 digits of account number		_____	
3.14	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$555.00
<u>Check all that apply.</u> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Dresden</u> OH 42821			
Date or dates debt was incurred		<u>8/8/2016</u>	
Last 4 digits of account number		_____	
3.15	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$30,605.00
<u>Check all that apply.</u> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Plano</u> TX 75093			
Date or dates debt was incurred		<u>1/1/2018</u>	
Last 4 digits of account number		_____	
3.16	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,914.00
<u>Check all that apply.</u> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Chicago</u> IL 60673-1216			
Date or dates debt was incurred		<u>01/1/2014 - 01/1/2018</u>	
Last 4 digits of account number		_____	

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Amount of claim

3.17	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$79,000.00
<u>AT&T Corp.</u>		<input type="checkbox"/> Contingent	
<u>c/o Assayag & Mauss</u>		<input type="checkbox"/> Unliquidated	
<u>2915 Redhill Ave., Suite 200</u>		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Costa Mesa</u> <u>CA</u> <u>92626</u>			
Date or dates debt was incurred		<u>12/1/2017</u>	
Last 4 digits of account number		_____	
3.18	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$20.00
<u>Beauregard Parish Sheriffs</u>		<input type="checkbox"/> Contingent	
<u>412 Bolivar Bishop Drive</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>DeRidder</u> <u>LA</u> <u>70634</u>			
Date or dates debt was incurred		<u>3/1/2018</u>	
Last 4 digits of account number		_____	
3.19	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$63,390.00
<u>BMO Harris Bank</u>		<input type="checkbox"/> Contingent	
<u>111 West Monroe Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Chicago</u> <u>IL</u> <u>60603</u>			
Date or dates debt was incurred		<u>12/15/2017</u>	
Last 4 digits of account number		_____	
3.20	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5.00
<u>Bossier City Parish</u>		<input type="checkbox"/> Contingent	
<u>620 Benton Road</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Bossier City</u> <u>LA</u> <u>71111</u>			
Date or dates debt was incurred		<u>3/1/2018</u>	
Last 4 digits of account number		_____	

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Amount of claim

3.21	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$10,000.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Nashport</u> OH 43830			
Date or dates debt was incurred		<u>5/15/2018</u>	
Last 4 digits of account number		_____	
3.22	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,418.53
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Hustonville</u> KY 40437-9165			
Date or dates debt was incurred		<u>1/22/2017 - 4/3/2018</u>	
Last 4 digits of account number		_____	
3.23	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$14,615.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Cleveland</u> OH 44128			
Date or dates debt was incurred		<u>12/1/2017</u>	
Last 4 digits of account number		_____	
3.24	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$250.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Dulles</u> VA 20166			
Date or dates debt was incurred		<u>12/1/2017</u>	
Last 4 digits of account number		_____	

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Amount of claim

3.25	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$20.00
<u>Buff Lo Dips</u>		<input type="checkbox"/> Contingent	
<u>200 West Main Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>McArthur</u> OH 45651			
Date or dates debt was incurred		3/1/2018	
Last 4 digits of account number		— — — —	
		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.26	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$4,105.00
<u>Bureau Veritas Consumer</u>		<input type="checkbox"/> Contingent	
<u>1000 Jupiter Road Suite 800</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Plano</u> TX 75081			
Date or dates debt was incurred		1/1/2017	
Last 4 digits of account number		— — — —	
		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.27	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,665.00
<u>Bureau of Workers Compensation Insurance</u>		<input type="checkbox"/> Contingent	
<u>13430 Yarmouth Drive</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Pickerington</u> OH 43147			
Date or dates debt was incurred		12/31/2017	
Last 4 digits of account number		— — — —	
		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.28	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,740.00
<u>C Digital Markets LLC</u>		<input type="checkbox"/> Contingent	
<u>2529 Washington Boulevard</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Baltimore</u> MD 21230			
Date or dates debt was incurred		1/1/2017	
Last 4 digits of account number		— — — —	
		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.29	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$9,230.00
<u>Cadre Computer Resources Inc</u>		<input type="checkbox"/> Contingent	
<u>201 East Street #1800</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Cincinnati OH 45202</u>			
Date or dates debt was incurred <u>2/2/2017</u>		Is the claim subject to offset?	
Last 4 digits of account number <u>_____</u>		<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
3.30	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$500.00
<u>Cameron Refuse</u>		<input type="checkbox"/> Contingent	
<u>2502 Country Club Drive</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Cameron Park CA 95682</u>			
Date or dates debt was incurred <u>1/1/2016</u>		Is the claim subject to offset?	
Last 4 digits of account number <u>_____</u>		<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
3.31	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,710.00
<u>Card Services</u>		<input type="checkbox"/> Contingent	
<u>??</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Date or dates debt was incurred</u>		Is the claim subject to offset?	
Last 4 digits of account number <u>_____</u>		<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
3.32	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5,670.00
<u>CENTURYLINK</u>		<input type="checkbox"/> Contingent	
<u>2323 Bryan Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Dallas TX 75201</u>			
Date or dates debt was incurred <u>5/1/2017</u>		Is the claim subject to offset?	
Last 4 digits of account number <u>_____</u>		<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	

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Amount of claim

3.33	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$6,085.00
<u>Chase Cardmember Services</u>		<input type="checkbox"/> Contingent	
<u>PO Box 15298</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Wilmington</u> <u>DE</u> <u>19850</u>			
Date or dates debt was incurred	<u>6/1/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
Basis for the claim:			
3.34	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,965.00
<u>Chem-Graphic Inc</u>		<input type="checkbox"/> Contingent	
<u>340 State Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Ludlow</u> <u>MA</u> <u>01056</u>			
Date or dates debt was incurred	<u>3/15/2016</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
Basis for the claim:			
3.35	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$23,970.00
<u>CIGNA Healthcare</u>		<input type="checkbox"/> Contingent	
<u>440 Polaris Parkway Suite 300</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Columbus</u> <u>OH</u> <u>43240</u>			
Date or dates debt was incurred	<u>12/31/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
Basis for the claim:			
3.36	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$10.00
<u>City of Thornton</u>		<input type="checkbox"/> Contingent	
<u>9500 Civic Center Drive</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Thornton</u> <u>CO</u> <u>80229</u>			
Date or dates debt was incurred	<u>3/1/2018</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	

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Amount of claim

3.37	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$55.00
<u>City & County of Broomfield</u>		<input type="checkbox"/> Contingent	
<u>One Descombes Drive</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Broomfield</u> CO 80020			
Date or dates debt was incurred		<u>3/1/2018</u>	
Last 4 digits of account number		_____	
		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.38	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$60.00
<u>City Borough of Juneau</u>		<input type="checkbox"/> Contingent	
<u>155 South Seward Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Juneau</u> AK 99801			
Date or dates debt was incurred		<u>3/1/2018</u>	
Last 4 digits of account number		_____	
		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.39	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$25.00
<u>City of Aurora</u>		<input type="checkbox"/> Contingent	
<u>130 South Chillicothe Road</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Aurora</u> OH 44202			
Date or dates debt was incurred		<u>3/1/2018</u>	
Last 4 digits of account number		_____	
		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.40	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$335.00
<u>City of Centennial</u>		<input type="checkbox"/> Contingent	
<u>13133 East Aprapahoe Road</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Centennial</u> CO 80112			
Date or dates debt was incurred		<u>1/1/2018</u>	
Last 4 digits of account number		_____	
		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.41	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$115.00
<u>City of Chandler</u>		<input type="checkbox"/> Contingent	
<u>P.O. Box 4008</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Chandler</u> <u>AZ</u> <u>85224</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/1/2018</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
Basis for the claim:			
3.42	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$35.00
<u>City of Colorado Springs</u>		<input type="checkbox"/> Contingent	
<u>30 South Nevada Avenue</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Colorado Springs</u> <u>CO</u> <u>80903</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/1/2018</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
Basis for the claim:			
3.43	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5.00
<u>City of Englewood</u>		<input type="checkbox"/> Contingent	
<u>1000 Englewood Parkway</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Englewood</u> <u>CO</u> <u>80110</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/1/2018</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
Basis for the claim:			
3.44	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$95.00
<u>City of Ft. Collins</u>		<input type="checkbox"/> Contingent	
<u>300 Laporte Avenue</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Ft. Collins</u> <u>CO</u> <u>80521</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/1/2018</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	

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Amount of claim

3.45	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5.00
<u>City of Longmont</u> <u>350 Kimbark Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Longmont</u> <u>CO</u> <u>80501</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/1/2018</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.46	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5.00
<u>City of Mesa</u> <u>P.O. Box 1466</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Mesa</u> <u>AZ</u> <u>85211</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/1/2018</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.47	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$25.00
<u>City of New Orleans</u> <u>1300 Perdido Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>New Orleans</u> <u>LA</u> <u>70112</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/1/2018</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.48	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5.00
<u>City of OF Arvadof</u> <u>8101 Ralsotn Road</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Arvada</u> <u>CO</u> <u>80002</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/1/2018</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	

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Amount of claim

3.49	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$9.00
<u>City of Phoenix</u>		<input type="checkbox"/> Contingent	
<u>200 West Wshington Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Phoenix</u> <u>AZ</u> <u>85003</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/1/2018</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
Basis for the claim:			
3.50	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$15.00
<u>City of Wheat Ridge</u>		<input type="checkbox"/> Contingent	
<u>7500 West 29th Avenue</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Wheat Ridge</u> <u>CO</u> <u>80033</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/1/2018</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
Basis for the claim:			
3.51	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,235.00
<u>Clendenin Brothers Inc</u>		<input type="checkbox"/> Contingent	
<u>4309 Erdman Avenue</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Baltimore</u> <u>MD</u> <u>21213</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>9/6/2017</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
Basis for the claim:			
3.52	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$27,950.00
<u>Clifton Larson Allen</u>		<input type="checkbox"/> Contingent	
<u>5001 Spring Valley Road #600W</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Dallas</u> <u>TX</u> <u>75244</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>1/1/2018</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	

Debtor The Longaberger Company

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Part 2: Additional Page

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Amount of claim

3.53	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$245,893.00
<u>CMS Solutions Credit Card Chargebacks</u>		<input type="checkbox"/> Contingent	
<u>1471 South 1800 East</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Salt Lake City</u> <u>UT</u> <u>84058</u>			
Date or dates debt was incurred	<u>5/8/2018</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
3.54	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$50,700.00
<u>Columbia Forest Products</u>		<input type="checkbox"/> Contingent	
<u>7900 McCloud Road Suite 200</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Greensboro</u> <u>NC</u> <u>27409</u>			
Date or dates debt was incurred	<u>3/20/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
3.55	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$586,000.00
<u>Commonwealth of Pennsylvania</u>		<input type="checkbox"/> Contingent	
<u>PO Box 280905</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Harrisburg</u> <u>PA</u> <u>17128-0905</u>			
Date or dates debt was incurred	<u>5/1/2016</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
3.56	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$138,000.00
<u>Commonwealth of Virginia</u>		<input type="checkbox"/> Contingent	
<u>1957 Westmoreland Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Richmond</u> <u>VA</u> <u>23230</u>			
Date or dates debt was incurred	<u>3/31/3017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	

Debtor The Longaberger Company

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Amount of claim

3.57	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5,000.00
<u>Cookie Sheldon</u> <u>1824 Stowe Road</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Ashtabula</u> <u>OH</u> <u>44004</u>			
Date or dates debt was incurred	<u>1/1/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Basis for the claim:			
3.58	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,525.00
<u>Coyote Logistics LLC</u> <u>2545 West Diversy Avenue 3rd Floor</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Chicago</u> <u>IL</u> <u>60647</u>			
Date or dates debt was incurred	<u>3/15/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Basis for the claim:			
3.59	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$9,690.00
<u>Craters & Freighters</u> <u>2220 Merritt Drive #200</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Garland</u> <u>OH</u> <u>75041</u>			
Date or dates debt was incurred	<u>1/1/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Basis for the claim:			
3.60	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$10,005.00
<u>Crexendo Business Solutions</u> <u>34269 Tupelo Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Fremont</u> <u>CA</u> <u>94555</u>			
Date or dates debt was incurred	<u>12/31/2016</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3.61	Nonpriority creditor's name and mailing address <u>Crossroads Oringinal Designs LTD</u> <u>115 Crossroads Blvd.</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$21,695.00
Basis for the claim:			
<u>Bucyrus</u> <u>OH</u> <u>44820</u>			
Date or dates debt was incurred <u>8/1/2016</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number <u> </u>			
3.62			
3.62	Nonpriority creditor's name and mailing address <u>Cullman County</u> <u>500 Second Avenue SW</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5.00
Basis for the claim:			
<u>Cullman</u> <u>AL</u> <u>35055</u>			
Date or dates debt was incurred <u>3/1/2018</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number <u> </u>			
3.63			
3.63	Nonpriority creditor's name and mailing address <u>Curbell Plastics Inc</u> <u>2900 East Pioneer Parkway</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,645.00
Basis for the claim:			
<u>Arlington</u> <u>TX</u> <u>76010</u>			
Date or dates debt was incurred <u>12/1/2016</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number <u> </u>			
3.64			
3.64	Nonpriority creditor's name and mailing address <u>DATABANK Holdings LTD</u> <u>400 South Akard Street</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$18,540.00
Basis for the claim:			
<u>Dallas</u> <u>TX</u> <u>75202</u>			
Date or dates debt was incurred <u>12/31/2017</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number <u> </u>			

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Amount of claim

3.65	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$285.00
<u>DB Gurney Co</u>		<input type="checkbox"/> Contingent	
<u>746 Washington Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Whitman</u> <u>MA</u> <u>02382</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>6/1/2017</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
Basis for the claim:			
3.66	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$20.00
<u>DC Treasurer</u>		<input type="checkbox"/> Contingent	
<u>1275 K Street NW</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Washington</u> <u>DC</u> <u>20005</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/1/2018</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
Basis for the claim:			
3.67	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$75,000.00
<u>De Lage Landen Financial</u>		<input type="checkbox"/> Contingent	
<u>c/o Ziegler Metzger LLP</u>		<input type="checkbox"/> Unliquidated	
<u>1111 Superior Ave., Suite 1000</u>		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Cleveland</u> <u>OH</u> <u>44114</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>2/10/2016</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
Basis for the claim:			
3.68	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$31,390.00
<u>Dimension Hardwood Veneer</u>		<input type="checkbox"/> Contingent	
<u>509 Woodville Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Edon</u> <u>OH</u> <u>43518</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>11/1/2017</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	

Debtor The Longaberger Company

Case number (if known) 18-32124-HDH

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Amount of claim

3.69	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$105.00
<u>Donna Jenkins</u>		<input type="checkbox"/> Contingent	
<u>361 Freeborn Avenue</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Zanesville</u> OH 43701		<u>Wages, Salaries and Commissions</u>	
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
3.70			
3.70	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$3,470.00
<u>Duncan, Green, Brown & Langene</u>		<input type="checkbox"/> Contingent	
<u>Capital Square 400 Locust Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Des Moines</u> IA 50309			
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
3.71			
3.71	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$60,440.00
<u>East Central Ohio Business Park</u>		<input type="checkbox"/> Contingent	
<u>14 North Park Place</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Newark</u> OH 43055			
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
3.72			
3.72	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$335.00
<u>Econo-Chem-Supply Inc</u>		<input type="checkbox"/> Contingent	
<u>3085 Scioto Darby Executive Court</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Hilliard</u> OH 43026			
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	

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Amount of claim

3.73	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$305.00
<u>Ed Maxwell</u> <u>704 Beech Street</u> <u>Warsaw</u> <u>OH</u> <u>43844</u>			
<i>Check all that apply.</i> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim: <u>Wages, Salaries and Commissions</u>			
Date or dates debt was incurred _____			
Is the claim subject to offset? <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
Last 4 digits of account number _____			
3.74	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,760.00
<u>Electronics for Imaging Inc</u> <u>3111 Canton Street</u> <u>Dallas</u> <u>TX</u> <u>75226</u>			
<i>Check all that apply.</i> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
Date or dates debt was incurred <u>12/1/2017</u>			
Is the claim subject to offset? <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
Last 4 digits of account number _____			
3.75	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$895.00
<u>European Tooling Systems Inc</u> <u>205 Creekside Drive</u> <u>Washington</u> <u>NC</u> <u>27889</u>			
<i>Check all that apply.</i> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
Date or dates debt was incurred <u>7/1/2017</u>			
Is the claim subject to offset? <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
Last 4 digits of account number _____			
3.76	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$9,035.00
<u>Fabri-Form Co Inc</u> <u>200 South Friendship Drive</u> <u>New Concord</u> <u>OH</u> <u>43762</u>			
<i>Check all that apply.</i> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
Date or dates debt was incurred <u>1/1/2017</u>			
Is the claim subject to offset? <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
Last 4 digits of account number _____			

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Amount of claim

3.77	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,335.00
<u>Fastenal Company</u> <u>2078 Otsego Avenue</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Coshockton</u> OH 43812			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>9/7/2017</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.78	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$22,500.00
<u>Fedeli Group</u> <u>5005 Rockside Road Suite 500</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Independence</u> OH 44131			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>12/15/2016</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.79	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$367,525.00
<u>FedEx</u> <u>3610 Hacks Cross Road</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Memphis</u> TN 78738			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>6/6/2016</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.80	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,495.00
<u>FedEx Freight East</u> <u>1501 North Walton Walker Blvd.</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Dallas</u> TX 75211			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>6/30/2017</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	

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Amount of claim

3.81	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,280.00
<u>Ferrell Gas LP</u>		<input type="checkbox"/> Contingent	
<u>451 National Road SE</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Hebron OH 43025</u>			
Date or dates debt was incurred	<u>12/1/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
3.82	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$230.00
<u>Filter Technologies, Inc.</u>		<input type="checkbox"/> Contingent	
<u>3150 West 36th Place</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Chicago IL 60632</u>			
Date or dates debt was incurred	<u>12/1/2016</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
3.83	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$60,450.00
<u>Fitzpatrick & Weller</u>		<input type="checkbox"/> Contingent	
<u>12 Mill Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Ellicottville NY 14731</u>			
Date or dates debt was incurred	<u>8/12/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
3.84	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,855.00
<u>Florida Dept. of Revenue</u>		<input type="checkbox"/> Contingent	
<u>2450 Shumard Oak Blvd.</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Tallahassee FL 32311</u>			
Date or dates debt was incurred	<u>1/1/2018</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	

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Amount of claim

3.85	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,215.00
<u>Fournier Rubber & Supply Co</u>		<input type="checkbox"/> Contingent	
<u>4849 Evanswood Drive</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Colombus OH 43229</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>8/8/2017</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
Basis for the claim:			
3.86	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
<u>Frueh Eastpointe, LLC</u>		<input type="checkbox"/> Contingent	
<u>4005 All American Way</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Zanesville OH 43701</u>		<u>Contract/Lease</u>	
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
Warehouse Lease ends 1/26/2020			
3.87	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,720.00
<u>Gary Roswell</u>		<input type="checkbox"/> Contingent	
<u>c/o Applied Laser Technology 2953 4560 J</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Cleveland OH 44128</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>1/1/2018</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
3.88	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$14,904.00
<u>Gayla Johnsen</u>		<input type="checkbox"/> Contingent	
<u>1525 Plainview Ave.</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Seward NE 68434</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>12/1/2016 - 4/30/2018</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	

Debtor The Longaberger Company

Case number (if known) 18-32124-HDH

Part 2: Additional Page

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Amount of claim

3.89	Nonpriority creditor's name and mailing address <u>General Roll Leaf Mfg Co</u> <u>P.O. Box 357</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$40.00</u>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Stottville</u> <u>NY</u> <u>12172</u>			
Date or dates debt was incurred	<u>1/1/2016</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input checked="" type="checkbox"/> Yes			
3.90	Nonpriority creditor's name and mailing address <u>Georgia Income Tax Division</u> <u>1800 Century Boulevard NE</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$26,265.00</u>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Altanta</u> <u>GA</u> <u>30345</u>			
Date or dates debt was incurred	<u>12/31/2018</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input checked="" type="checkbox"/> Yes			
3.91	Nonpriority creditor's name and mailing address <u>GM Specialities Inc</u> <u>1 Commercial Road</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,925.00</u>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Scarborough</u> <u>ME</u> <u>04074</u>			
Date or dates debt was incurred	<u>8/7/2015</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input checked="" type="checkbox"/> Yes			
3.92	Nonpriority creditor's name and mailing address <u>Goodman Veneer & Lumber</u> <u>200 C Avenue</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$47,900.00</u>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Goodman</u> <u>WI</u> <u>54125</u>			
Date or dates debt was incurred	<u>6/22/1017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input checked="" type="checkbox"/> Yes			

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Amount of claim

3.93	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$12,700.00
<u>Gottlieb Johnston Beam</u> <u>320 Main Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Zanesville</u> OH 43701			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>12/1/2016</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.94	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$645.00
<u>Grainger Industrial</u> <u>3640 Interchange Road</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Colombus</u> OH 43204			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/15/2018</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.95	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$350.00
<u>Granville High School</u> <u>248 New Burg Street</u> <u>Granville, OH 430263</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>1/1/2016</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.96	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,465.00
<u>Great Lakes Custom Tool Mfg</u> <u>101 Old Peshtigo Road</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Peshtigo</u> WI 54157			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/8/2017</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	

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Amount of claim

3.97	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$490.00
<u>Greg Lackland</u>		<input type="checkbox"/> Contingent	
<u>4057 Kyndra Circle</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Richardson</u> <u>TX</u> <u>75082</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/20/2018</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
Basis for the claim:			
3.98	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,980.00
<u>Gregory Kitchen</u>		<input type="checkbox"/> Contingent	
<u>1400 Hi Line Drive</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Dallas</u> <u>TX</u> <u>75207</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>1/1/2017</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
Basis for the claim:			
3.99	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$150.00
<u>Guernsey Muskingam Electirc</u>		<input type="checkbox"/> Contingent	
<u>17 Liberty Road</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>New Concord</u> <u>OH</u> <u>43762</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>1/1/2018</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
Basis for the claim:			
3.100	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$3,565.00
<u>Gutridge Plumbing Inc</u>		<input type="checkbox"/> Contingent	
<u>5490 88S Second Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Newark</u> <u>OH</u> <u>43055</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>8/12/2017</u>		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	

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Amount of claim

3.101	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$8,320.00
<u>Harry and David</u> <u>2500 South Pacific Highway</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Medford</u> <u>OR</u> <u>97501</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>5/1/2018</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.102	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$36,540.00
<u>Hellmann Worldwide Logistics</u> <u>1200 Minters Chapel Road Suite 300</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Grapevine</u> <u>TX</u> <u>76051</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>5/6/2017</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.103	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$41,805.00
<u>Hiland Wood Products</u> <u>4955 TR401</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Walnut Creek</u> <u>OH</u> <u>44687</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>5/12/2017</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.104	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$25.00
<u>Hilscher Clarke Electric</u> <u>572 South Third Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Coshockton</u> <u>OH</u> <u>43812</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>1/1/2016</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	

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Amount of claim

3.105	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$500.00
<u>Hittle Electric Inc</u>		<input type="checkbox"/> Contingent	
<u>8160 Poplar Forks Rd SE</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Newark OH 43056</u>			
Date or dates debt was incurred		1/1/2015	
Last 4 digits of account number		_____	
3.106	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$700.00
<u>Home Plate Design</u>		<input type="checkbox"/> Contingent	
<u>1009 Regency Cir</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Blue Bell PA 19422</u>		<u>Vendor</u>	
Date or dates debt was incurred		_____	
Last 4 digits of account number		_____	
3.107	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$9,370.00
<u>IA Lodging Savannah Barnard TR</u>		<input type="checkbox"/> Contingent	
<u>1400 Barnard Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Savannah GA 31401</u>			
Date or dates debt was incurred		1/1/2017	
Last 4 digits of account number		_____	
3.108	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$345.00
<u>Idaho State Tax Commission</u>		<input type="checkbox"/> Contingent	
<u>P.O. Box 36</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Boise ID 83722</u>			
Date or dates debt was incurred		1/1/2018	
Last 4 digits of account number		_____	

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Amount of claim

3.109	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$7,990.00
<u>Indiana Dept of Revenue</u> <u>2217 100 North Senate Avenue #N248</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Indianapolis</u> <u>IN</u> <u>42604</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>12/1/2017</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.110	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$12,465.00
<u>International Paper Company</u> <u>1851 Tamarack Road</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Newark</u> <u>OH</u> <u>43055</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/12/2017</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.111	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5.00
<u>Isaacs Fluid Power Equipment Co</u> <u>6091 Commerce Court</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Mason</u> <u>OH</u> <u>45040</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
<u>3/1/2018</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	
3.112	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$705.00
<u>Jennifer Frisbie</u> <u>327 Union Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Newark</u> <u>OH</u> <u>43055</u>		<u>Wages, Salaries and Commissions</u>	
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		_____	

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Amount of claim

3.113	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$260.00
<u>Jennifer Talvensaari</u> <u>130 Elmwood Avenue</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Evanston</u> <u>IL</u> <u>60202</u>		<u>Wages, Salaries and Commissions</u>	
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.114	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
<u>Jim Lepi</u> <u>600, 602, 606, 608 Main Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Dresden</u> <u>OH</u> <u>43821</u>		<u>Contract/Lease</u>	
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Patio Shops Ends 12/1/2019			
3.115	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
<u>Jim Lepi</u> <u>601 Main Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Dresden</u> <u>OH</u> <u>43821</u>		<u>Contract/Lease</u>	
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Contract/Lease Office Space Ends 12/1/2019			

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Amount of claim

3.116	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,250.00
<u>Joe Dinan</u> <u>5270 Wilshire Dr.</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Zanesville</u> <u>OH</u> <u>43701</u>		<u>Wages, Salaries and Commissions</u>	
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number			
3.117	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,655.00
<u>John Rochon</u> <u>2950 N. Harwood Ste. 2200</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Dallas</u> <u>TX</u> <u>75201</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number			
3.118	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$875.00
<u>John Rochon Jr.</u> <u>c/o JRJR Networks 2950 Harwood Street Su</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Dallas</u> <u>TX</u> <u>75201</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number			
3.119	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$3,490.00
<u>Kaniuk Law Office PA</u> <u>301 Yamato road Suite 2121</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Baco Raton</u> <u>FL</u> <u>33431</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number			

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Amount of claim

3.120 Nonpriority creditor's name and mailing address <u>Kathrine Vickers</u> <u>20805 County Road 367</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$105.00
Basis for the claim: <u>Walhonding</u> OH <u>43843</u> <u>Wages, Salaries and Commissions</u>		
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number _____		
3.121 Nonpriority creditor's name and mailing address <u>Kay Bowling & Trophy Supply</u> <u>1255 Linden Avenue</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$770.00
Basis for the claim: <u>Zanesville</u> OH <u>43701</u>		
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number _____		
3.122 Nonpriority creditor's name and mailing address <u>Keim Lumber COMPANY</u> <u>4465 Route 557</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$825.00
Basis for the claim: <u>Charm</u> OH <u>44654</u>		
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number _____		
3.123 Nonpriority creditor's name and mailing address <u>Kelli McVay</u> <u>895 Sharon Glyn Road</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$40.00
Basis for the claim: <u>Newark</u> OH <u>43055</u> <u>Wages, Salaries and Commissions</u>		
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Last 4 digits of account number _____		

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Amount of claim

3.124	Nonpriority creditor's name and mailing address <u>Kelly Mynes</u> <u>690 County Line Road</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,755.00
Basis for the claim: <u>Hopewell</u> OH 43746		<u>Wages, Salaries and Commissions</u>	
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
 3.125			
Nonpriority creditor's name and mailing address <u>Kenai Peninsula Borough</u> <u>144 North Binkley Street</u>		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$385.00
Basis for the claim: <u>Soldotna</u> AK 99669			
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
 3.126			
Nonpriority creditor's name and mailing address <u>Kentucky State Treasurer</u> <u>1050 US 127 #100</u>		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,775.00
Basis for the claim: <u>Frankfort</u> KY 40601			
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
 3.127			
Nonpriority creditor's name and mailing address <u>Kravitz, Brown & Dorch</u> <u>Suite 200 65 East State Street</u>		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$25,662.00
Basis for the claim: <u>Columbus</u> OH 43215			
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			

Debtor The Longaberger Company

Case number (if known) 18-32124-HDH

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.128	Nonpriority creditor's name and mailing address <u>Laura Davis</u> <u>692 McKinney Avenue</u> <hr/> <u>Newark</u> <u>OH</u> <u>43055</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Basis for the claim: <u>Wages, Salaries and Commissions</u>	Amount of claim <u>\$100.00</u>
Date or dates debt was incurred <hr/> Last 4 digits of account number <hr/>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.129	Nonpriority creditor's name and mailing address <u>Laura Seward</u> <u>917-12 Main Street</u> <hr/> <u>Alexandria</u> <u>OH</u> <u>43001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Basis for the claim: <u>Wages, Salaries and Commissions</u>	Amount of claim <u>\$535.00</u>
Date or dates debt was incurred <hr/> Last 4 digits of account number <hr/>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.130	Nonpriority creditor's name and mailing address <u>Law Offices of Scott Doody</u> <u>5215 North O'Connor Blvd. Suite 200</u> <hr/> <u>Irving</u> <u>TX</u> <u>75039</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Basis for the claim: <hr/>	Amount of claim <u>\$6,525.00</u>
Date or dates debt was incurred <hr/> Last 4 digits of account number <hr/>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.131	Nonpriority creditor's name and mailing address <u>Lincoln National Life Insurance</u> <u>1300 South Clinton Street</u> <hr/> <u>Fort Wayne</u> <u>IN</u> <u>46802</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Basis for the claim: <hr/>	Amount of claim <u>\$27,900.00</u>
Date or dates debt was incurred <hr/> Last 4 digits of account number <hr/>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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Amount of claim

<p>3.132 Nonpriority creditor's name and mailing address</p> <p><u>Linda Bowers</u> <u>1273 Oak Lane</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p>Amount of claim \$1,270.00</p>
<p>Basis for the claim: Wages, Salaries and Commissions</p>		
<p>Date or dates debt was incurred _____</p>		
<p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>		
<p>3.133 Nonpriority creditor's name and mailing address</p> <p><u>Livingston Parish SCHOOL</u> <u>13909 Florida Blvd.</u></p>		
<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>		
<p>Basis for the claim:</p>		
<p><u>Livingston</u> <u>LA</u> <u>70754</u></p>		
<p>Date or dates debt was incurred <u>3/1/2018</u></p>		
<p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>		
<p>3.134 Nonpriority creditor's name and mailing address</p> <p><u>Lobo Leather</u> <u>3532 460th Street</u></p>		
<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>		
<p>Basis for the claim:</p>		
<p><u>Orange City</u> <u>IA</u> <u>51041</u></p>		
<p>Date or dates debt was incurred <u>1/1/2017</u></p>		
<p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>		
<p>3.135 Nonpriority creditor's name and mailing address</p> <p><u>Louisiana Dept. of Revenue</u> <u>P.O. Box 201</u></p>		
<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>		
<p>Basis for the claim:</p>		
<p><u>Baton Rouge</u> <u>LA</u> <u>70821</u></p>		
<p>Date or dates debt was incurred <u>3/1/2018</u></p>		
<p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>		

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Amount of claim

3.136	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$4,995.00
<u>M2 Compliance</u>		<input type="checkbox"/> Contingent	
<u>74075 El Paseo</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Palm Desert</u> <u>CA</u> <u>92260</u>			
Date or dates debt was incurred		<u>12/1/2017</u>	
Last 4 digits of account number		_____	
3.137	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$3,180.00
<u>Machinery & Solutions L.L.C.</u>		<input type="checkbox"/> Contingent	
<u>7022 South 42d Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Phoenix</u> <u>AZ</u> <u>85042</u>			
Date or dates debt was incurred		<u>3/3/2017</u>	
Last 4 digits of account number		_____	
3.138	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$680.00
<u>Maine Revenue Service</u>		<input type="checkbox"/> Contingent	
<u>51 Commerce Drive</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Augusta</u> <u>ME</u> <u>04330</u>			
Date or dates debt was incurred		<u>1/1/2018</u>	
Last 4 digits of account number		_____	
3.139	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,825.00
<u>Marc Mazzeri</u>		<input type="checkbox"/> Contingent	
<u>2633 McKinney</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Dallas</u> <u>TX</u> <u>75204</u>			
Date or dates debt was incurred		<u>3/30/2018</u>	
Last 4 digits of account number		_____	

Debtor The Longaberger Company

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Amount of claim

3.140	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,125.00
<u>Marriott Hotel Service</u>		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
Date or dates debt was incurred		1/1/2017	Is the claim subject to offset?
Last 4 digits of account number		— — — —	<input checked="" type="checkbox"/> No
			<input type="checkbox"/> Yes
3.141	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$510.00
<u>Massachusetts Dept of Rev</u>		<input type="checkbox"/> Contingent	
<u>P.O. Box 7000</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Boston</u>		MA 02204	— — — —
Date or dates debt was incurred		1/1/2018	Is the claim subject to offset?
Last 4 digits of account number		— — — —	<input checked="" type="checkbox"/> No
			<input type="checkbox"/> Yes
3.142	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$885.00
<u>McCullough's Tree Service Inc</u>		<input type="checkbox"/> Contingent	
<u>955 Alfred Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Zanesville</u>		OH 43701	— — — —
Date or dates debt was incurred		— — — —	Is the claim subject to offset?
Last 4 digits of account number		— — — —	<input checked="" type="checkbox"/> No
			<input type="checkbox"/> Yes
3.143	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,040.00
<u>Mediate First</u>		<input type="checkbox"/> Contingent	
<u>200 East Robinson Street #700</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Orlando</u>		FL 32801	— — — —
Date or dates debt was incurred		1/1/2017	Is the claim subject to offset?
Last 4 digits of account number		— — — —	<input checked="" type="checkbox"/> No
			<input type="checkbox"/> Yes

Debtor The Longaberger Company

Case number (if known) 18-32124-HDH

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Amount of claim

3.144	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$8,110.00
<u>Michael Kennedy</u>		<input type="checkbox"/> Contingent	
<u>4330 Wesleyan Road</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Granville</u> <u>OH</u> <u>43023</u>		<u>Wages, Salaries and Commissions</u>	
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
3.145			
3.145	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$350.00
<u>Michigan First Aid & SAFETY CO</u>		<input type="checkbox"/> Contingent	
<u>16199 Common Road</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Roseville</u> <u>MI</u> <u>48066</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
3.146			
3.146	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,180.00
<u>Midland Inetenational Ltd</u>		<input type="checkbox"/> Contingent	
<u>9506 La Force Blvd.</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Midland</u> <u>TX</u> <u>79706</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	
3.147			
3.147	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$177,000.00
<u>Midland International</u>		<input type="checkbox"/> Contingent	
<u>c/o Jeffrey Sharp, Esq.</u>		<input type="checkbox"/> Unliquidated	
<u>21 Middle St.</u>		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>PO Box 248</u>			
<u>Galena</u> <u>OH</u> <u>43201</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
Last 4 digits of account number		<input type="checkbox"/> Yes	

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Amount of claim

3.148	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$875.00
<u>Mike Montgomery</u> <u>210 Ridge Road</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Zanesville</u> <u>OH</u> <u>43701</u>		<u>Wages, Salaries and Commissions</u>	
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.149	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$75.00
<u>Missouri Dept of Revenue</u> <u>301 West High Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Jefferson City</u> <u>MO</u> <u>65101</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.150	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$195.00
<u>Molly Phillips</u> <u>100 3rd Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Columbus</u> <u>OH</u> <u>43215</u>		<u>Wages, Salaries and Commissions</u>	
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.151	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$155.00
<u>Montgomery County</u> <u>451 West Third Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Dayton</u> <u>OH</u> <u>45422</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3.152	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$9,250.00
<u>Multi Form Plastics Inc</u> <u>700 Kent Road</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Batavia</u> <u>OH</u> <u>45103</u>			
Date or dates debt was incurred <u>3/15/2017</u>		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.153			
3.153	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$8,290.00
<u>Muskingum County Treasurer</u> <u>400 Main Street #D</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Zanesville</u> <u>OH</u> <u>43701</u>			
Date or dates debt was incurred <u>12/31/2017</u>		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.154			
3.154	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$610.00
<u>Nebraska Dept of Revenue</u> <u>1313 Farnam Street #10</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
Date or dates debt was incurred <u>1/1/2018</u>		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.155			
3.155	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$365.00
<u>Nevada Dept of Taxtion</u> <u>2550 Paseo Verde Parkway #180</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Henderson</u> <u>NV</u> <u>89074</u>			
Date or dates debt was incurred <u>1/1/2018</u>		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3.156	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$87,000.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
Binghamton NY 12226			
Date or dates debt was incurred <u>1/31/2018</u>		Is the claim subject to offset?	
Last 4 digits of account number <u>_____</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.157 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: \$8,130.00			
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
Newark OH 43055			
Date or dates debt was incurred <u>12/31/2017</u>		Is the claim subject to offset?	
Last 4 digits of account number <u>_____</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.158 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: \$8,000.00			
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
Canton OH 44718			
Date or dates debt was incurred <u>3/12/2017</u>		Is the claim subject to offset?	
Last 4 digits of account number <u>_____</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.159 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: \$2,302.00			
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
Newark OH 43055			
Date or dates debt was incurred <u>4/15/2017</u>		Is the claim subject to offset?	
Last 4 digits of account number <u>_____</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3.160	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$86,967.00
<u>Niche Group</u>		<input type="checkbox"/> Contingent	
<u>2255 Glades Road Suite 324 Atrium</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Boca Raton</u>	<u>FL</u>	<u>32802-1511</u>	
Date or dates debt was incurred	<u>10/10/2017</u>		
Last 4 digits of account number	_____		
3.161	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,730.00
<u>Ohio Dept. of Commerce</u>		<input type="checkbox"/> Contingent	
<u>6606 Tussing Road</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Reynoldsburg</u>	<u>OH</u>	<u>43068</u>	
Date or dates debt was incurred	<u>1/1/2017</u>		
Last 4 digits of account number	_____		
3.162	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$540.00
<u>Ohio Travel Bag</u>		<input type="checkbox"/> Contingent	
<u>6481 Davis Industrial Parkway</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Solon</u>	<u>OH</u>	<u>44139</u>	
Date or dates debt was incurred	<u>1/1/2016</u>		
Last 4 digits of account number	_____		
3.163	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$200.00
<u>One America Retirement Service</u>		<input type="checkbox"/> Contingent	
<u>12770 Coit Road</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Dallas</u>	<u>TX</u>	<u>75251</u>	
Date or dates debt was incurred	<u>1/1/2017</u>		
Last 4 digits of account number	_____		

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Amount of claim

<p>3.164 Nonpriority creditor's name and mailing address</p> <p>Packard Forest Products, Inc 2068 Integrity Drive N</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p>\$14,380.00</p>
<p>Basis for the claim:</p>		
<p>Columbus OH 43209</p>		
<p>Date or dates debt was incurred</p>	<p>10/2/2017</p>	
<p>Last 4 digits of account number</p>	<p>— — — —</p>	
<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>		
<p>3.165 Nonpriority creditor's name and mailing address</p> <p>PCA-PACKAGING CORP OF AMERICA 2510 West Miller Road</p>		
<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>		
<p>Basis for the claim:</p>		
<p>Garland TX 75041</p>		
<p>Date or dates debt was incurred</p>	<p>12/12/2017</p>	
<p>Last 4 digits of account number</p>	<p>— — — —</p>	
<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>		
<p>3.166 Nonpriority creditor's name and mailing address</p> <p>Piedmont Plastics Inc 460 A Schrock Road</p>		
<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>		
<p>Basis for the claim:</p>		
<p>Columbus OH 43229</p>		
<p>Date or dates debt was incurred</p>	<p>2/12/2017</p>	
<p>Last 4 digits of account number</p>	<p>— — — —</p>	
<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>		
<p>3.167 Nonpriority creditor's name and mailing address</p> <p>PITNEY BOWES INC 1101 Paddock Street</p>		
<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>		
<p>Basis for the claim:</p>		
<p>Grand Prairie TX 75050</p>		
<p>Date or dates debt was incurred</p>	<p>12/1/2017</p>	
<p>Last 4 digits of account number</p>	<p>— — — —</p>	
<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>		

Debtor The Longaberger Company

Case number (if known) 18-32124-HDH

Part 2: Additional Page

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Amount of claim

3.168	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$38,605.00
<u>PMB Helin Donovan</u>		<input type="checkbox"/> Contingent	
<u>12301 Research Blvd. Building 5</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Austin</u> <u>TX</u> <u>78759</u>			
Date or dates debt was incurred	<u>12/31/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
3.169	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$698.00
<u>PR NEWSWIRE Assoc LLC</u>		<input type="checkbox"/> Contingent	
<u>1300 East 9th Street</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Cleveland</u> <u>OH</u> <u>44114</u>			
Date or dates debt was incurred	<u>1/1/2016</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
3.170	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$3,555.00
<u>Premier Packaging LLC</u>		<input type="checkbox"/> Contingent	
<u>3900 Produce Road</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Louisville</u> <u>KY</u> <u>40218</u>			
Date or dates debt was incurred	<u>1/1/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	
3.171	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$23,200.00
<u>Producers Gas Sales</u>		<input type="checkbox"/> Contingent	
<u>1500 Granville Road</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Newark</u> <u>OH</u> <u>43055</u>			
Date or dates debt was incurred	<u>12/1/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
<input type="checkbox"/>		<input type="checkbox"/> Yes	

Debtor The Longaberger Company

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Amount of claim

3.172	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$14,235.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Carrollton</u> <u>TX</u> <u>75006</u>			
Date or dates debt was incurred		<u>11/1/2017</u>	
Last 4 digits of account number		_____	
3.173	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,749,729.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Beachwood</u> <u>OH</u> <u>44122</u>			
Date or dates debt was incurred		<u>12/11/2017</u>	
Last 4 digits of account number		_____	
3.174	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,040.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>San Antonio</u> <u>TX</u> <u>78218</u>			
Date or dates debt was incurred		<u>5/15/2018</u>	
Last 4 digits of account number		_____	
3.175	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$375.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Newark</u> <u>OH</u> <u>43055</u>			
Date or dates debt was incurred		_____	
Last 4 digits of account number		_____	

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Amount of claim

3.176	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$355.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Dallas</u> <u>TX</u> <u>75207</u>			
Date or dates debt was incurred		<u>8/30/2016</u>	
Last 4 digits of account number		_____	
3.177	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$570.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Newark</u> <u>OH</u> <u>43055</u>		<u>Wages, Salaries and Commissions</u>	
Date or dates debt was incurred		_____	
Last 4 digits of account number		_____	
3.178	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$18,110.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Chicago</u> <u>IL</u> <u>60622</u>			
Date or dates debt was incurred		<u>8/1/2017</u>	
Last 4 digits of account number		_____	
3.179	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$360.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Newark</u> <u>OH</u> <u>43055</u>			
Date or dates debt was incurred		<u>11/30/2016</u>	
Last 4 digits of account number		_____	

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Amount of claim

3.180	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,630.00
<u>SafeCare</u> <u>P.O. Box 3995</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Atlanta GA</u> <u>GA</u> <u>30302</u>			
Date or dates debt was incurred	<u>2/5/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Basis for the claim:			
3.181	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$14,830.00
<u>SAGE Software</u> <u>2807 Allen Street #377</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Dallas TX</u> <u>TX</u> <u>75204</u>			
Date or dates debt was incurred	<u>5/1/2018</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Basis for the claim:			
3.182	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$215.00
<u>Schneider Logistics</u> <u>2177 Williams Road</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Obetz</u> <u>OH</u> <u>43207</u>			
Date or dates debt was incurred	<u>3/22/2016</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Basis for the claim:			
3.183	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$3,450.00
<u>SELECT FIRE PROTECTION LLC</u> <u>710 Preservation Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Fairborn</u> <u>OH</u> <u>45324</u>			
Date or dates debt was incurred	<u>12/1/2016</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3.184	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$690.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
<p>Basis for the claim:</p> <hr/>			
<p>Date or dates debt was incurred</p> <hr/>		<p>Is the claim subject to offset?</p>	
<p>Last 4 digits of account number</p> <hr/>		<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	
3.185	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$25,000.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
<p>Basis for the claim:</p> <hr/>			
<p>Beachwood OH 44122</p> <hr/>		<p>Is the claim subject to offset?</p>	
<p>Date or dates debt was incurred</p> <hr/>		<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	
<p>Last 4 digits of account number</p> <hr/>		<p>As of the petition filing date, the claim is:</p>	
3.186	Nonpriority creditor's name and mailing address	\$7,370.00	
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
<p>Basis for the claim:</p> <hr/>			
<p>Source Management Ltd</p> <hr/>		<p>Is the claim subject to offset?</p>	
<p>38/F, Office Tower, Convention Plaza, 1</p> <hr/>		<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	
<p>Wanchai</p> <hr/>		<p>As of the petition filing date, the claim is:</p>	
<p>Hong Kong, China</p> <hr/>		<p>\$7,370.00</p>	
3.187	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$4,185.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
<p>Basis for the claim:</p> <hr/>			
<p>Parket TX 75002</p> <hr/>		<p>Is the claim subject to offset?</p>	
<p>Date or dates debt was incurred</p> <hr/>		<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	
<p>Last 4 digits of account number</p> <hr/>		<p>As of the petition filing date, the claim is:</p>	

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Amount of claim

3.188	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$650.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Colombus</u> OH 43206			
Date or dates debt was incurred <u>1/1/2018</u>		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.189	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$28,780.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Worthington</u> OH 43085			
Date or dates debt was incurred <u>3/1/2018</u>		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.190	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$10.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Covington</u> LA 70434			
Date or dates debt was incurred <u>3/1/2018</u>		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.191	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$16,225.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Dallas TX</u> TX 75237			
Date or dates debt was incurred <u>12/1/2017</u>		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3.192	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$139,400.00
<u>State of Indiana Dept. of Revenue</u>		<input type="checkbox"/> Contingent	
<u>PO Box 1685</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Indianapolis</u> <u>IN</u> <u>46204</u>			
Date or dates debt was incurred		<u>12/31/2017</u>	
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
3.193	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$222,196.00
<u>State of Maryland</u>		<input type="checkbox"/> Contingent	
<u>Taxpayer Service Section 110 Carroll St.</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Annapolis</u> <u>MD</u> <u>21411</u>			
Date or dates debt was incurred		<u>1/31/2018</u>	
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
3.194	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$81,500.00
<u>State of Ohio</u>		<input type="checkbox"/> Contingent	
<u>PO Box 530</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Columbus</u> <u>OH</u> <u>43215</u>			
Date or dates debt was incurred		<u>8/1/2017</u>	
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
3.195	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$75.00
<u>State of Rhode Island</u>		<input type="checkbox"/> Contingent	
<u>One Capital Hill</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Providence</u> <u>RI</u> <u>02908</u>			
Date or dates debt was incurred		<u>3/1/2018</u>	
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

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Amount of claim

3.196	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$104,000.00
<u>State of West Virginia</u>		<input type="checkbox"/> Contingent	
<u>State Capitol Bldg. 1 W-300</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Charleston</u> <u>WV</u> <u>25301</u>			
Date or dates debt was incurred		<u>12/31/2015</u>	
Last 4 digits of account number		— — — —	
		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.197	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$455.00
<u>Sterling Paper Co</u>		<input type="checkbox"/> Contingent	
<u>1200 South Sylvania Avenue</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Ft Worth</u> <u>TX</u> <u>76111</u>			
Date or dates debt was incurred		<u>8/15/2016</u>	
Last 4 digits of account number		— — — —	
		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.198	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,005.00
<u>Steven Pearce</u>		<input type="checkbox"/> Contingent	
<u>500 W. Wilson Bridge</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Columbus</u> <u>OH</u> <u>43085</u>		<u>Wages, Salaries and Commissions</u>	
Date or dates debt was incurred			
Last 4 digits of account number		— — — —	
		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.199	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,450.00
<u>Stone County Ironworks</u>		<input type="checkbox"/> Contingent	
<u>408 Ironworks Drive</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Mountain View</u> <u>AR</u> <u>72560</u>			
Date or dates debt was incurred		<u>8/8/2017</u>	
Last 4 digits of account number		— — — —	
		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.200	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$10,230.00
<u>SX Industries</u>		<input type="checkbox"/> Contingent	
<u>77 Gravois Road</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>St. Louis</u> <u>MO</u> <u>63123</u>			
Date or dates debt was incurred		<u>1/1/2017</u>	
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
3.201	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$103,100.00
<u>Tai Yi</u>		<input type="checkbox"/> Contingent	
<u>NO 118 ZHALN SCIENTIFIC AND TECHNOLOGICA</u>		<input type="checkbox"/> Unliquidated	
<u>Yixing, China</u>		<input type="checkbox"/> Disputed	
Basis for the claim:			
Date or dates debt was incurred		<u>4/1/2017</u>	
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
3.202	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,092,629.00
<u>Tamala Longaberger</u>		<input type="checkbox"/> Contingent	
<u>c/o Steven Tigges</u>		<input type="checkbox"/> Unliquidated	
<u>41 S. High Street, Suite 3500</u>		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Columbus</u> <u>OH</u> <u>43215</u>			
Date or dates debt was incurred		<u>4/28/2018</u>	
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
3.203	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,775.00
<u>Tandy Leather Factory</u>		<input type="checkbox"/> Contingent	
<u>2100 Morse Road</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Colombus</u> <u>OH</u> <u>43229</u>			
Date or dates debt was incurred		<u>12/15/2016</u>	
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

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Amount of claim

3.204	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$30,660.00
<u>TekSystems</u> <u>6363 State Highway 161</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Irving</u> <u>TX</u> <u>75063</u>			
Date or dates debt was incurred	<u>2/2/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.205	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$30.00
<u>The Gaslight Group LLC</u> <u>325 East Bay Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Savannah</u> <u>GA</u> <u>31401</u>			
Date or dates debt was incurred	<u>6/1/2016</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.206	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$59,250.00
<u>The Old Trai Printing Co.</u> <u>100 Fornoff Road</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Columbus</u> <u>OH</u> <u>43207</u>			
Date or dates debt was incurred	<u>12/15/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.207	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$350.00
<u>The Supreme Court of OHIO</u> <u>65 South Front Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Colombus</u> <u>OH</u> <u>43215</u>			
Date or dates debt was incurred	<u>1/1/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor The Longaberger Company

Case number (if known) 18-32124-HDH

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.208	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$22,450.00
<u>Thermoform Products, LLC</u> <u>1777 Commerce Drive</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Stow OH 44244</u>			
Date or dates debt was incurred <u>8/13/2017</u>		Is the claim subject to offset?	
Last 4 digits of account number <u>_____</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.209	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$13,765.00
<u>Timber Products of Iron Mountain</u> <u>611 North Industrial Drive</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Iron Mountain MI 49801</u>			
Date or dates debt was incurred <u>6/12/2017</u>		Is the claim subject to offset?	
Last 4 digits of account number <u>_____</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.210	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$29,140.00
<u>Tina Smythe</u> <u>8300 Dresden Road</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Dresden OH 43821</u>			
Date or dates debt was incurred <u>4/15/2018</u>		Is the claim subject to offset?	
Last 4 digits of account number <u>_____</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.211	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$10.00
<u>Town of Silverthorne Co</u> <u>601 Center Circle</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Silverthorne CO 80498</u>			
Date or dates debt was incurred <u>3/1/2018</u>		Is the claim subject to offset?	
Last 4 digits of account number <u>_____</u>		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor The Longaberger Company

Case number (if known) 18-32124-HDH

Part 2: Additional Page

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Amount of claim

3.212	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$115.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
Windsor OH 44099			
Date or dates debt was incurred <u>3/1/2018</u>		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3.213	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$11,250.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
Plano TX 75024			
Date or dates debt was incurred <u>12/1/2017</u>		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3.214	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$10,000.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
Dallas TX 75219			
Date or dates debt was incurred <u>7/1/2017</u>		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3.215	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$38,370.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
Pleasant Prairie WI 53158			
Date or dates debt was incurred <u>11/1/2017</u>		Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			

Debtor The Longaberger Company

Case number (if known) 18-32124-HDH

Part 2: Additional Page

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Amount of claim

3.216	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$64,500.00
<u>United Healthcare</u> <u>901 Main Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Dallas</u> <u>TX</u> <u>75202</u>			
Date or dates debt was incurred		<u>6/1/2018</u>	
Last 4 digits of account number		_____	
3.217	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$205.00
<u>United Refrigeration Inc</u> <u>985 Joyce Avenue</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Colombus</u> <u>OH</u> <u>43219</u>			
Date or dates debt was incurred		<u>1/1/2016</u>	
Last 4 digits of account number		_____	
3.218	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,930.00
<u>United Silicone</u> <u>4471 Walden Avenue</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Lancaster</u> <u>NY</u> <u>14086</u>			
Date or dates debt was incurred		<u>5/2/2017</u>	
Last 4 digits of account number		_____	
3.219	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$348,922.00
<u>UPS</u> <u>56 Glenlake Parkway NE</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Atlanta</u> <u>GA</u> <u>94025</u>			
Date or dates debt was incurred		<u>5/23/2016</u>	
Last 4 digits of account number		_____	

Debtor The Longaberger Company

Case number (if known) 18-32124-HDH

Part 2: Additional Page

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Amount of claim

3.220	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5,895.00
<u>UPS Supply Chain Solutions</u> <u>1555 West 23rd Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Dallas TX 75261</u>			
Date or dates debt was incurred	<u>8/1/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.221	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$120.00
<u>Vermont Dept of Taxes</u> <u>133 State Street</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Montpelier VT 05602</u>			
Date or dates debt was incurred	<u>3/1/2018</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.222	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$8,880.00
<u>Vigar Industrial Co Ltd</u> <u>B Chong Ming Bldg. 72</u> <u>Wan Kowloon, HK</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>— — — —</u>			
Date or dates debt was incurred	<u>1/1/2016</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.223	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$580.00
<u>Vision Service Plan OH</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim:			
<u>Omaha NE 68102</u>			
Date or dates debt was incurred	<u>1/1/2016</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor The Longaberger Company

Case number (if known) 18-32124-HDH

Part 2: Additional Page

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Amount of claim

3.224	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$9,665.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Fairborn</u> OH 45324			
Date or dates debt was incurred <u>12/1/2017</u>		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.225 Nonpriority creditor's name and mailing address			
<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Louisville</u> KY 40202			
Date or dates debt was incurred <u>5/1/2018</u>		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.226 Nonpriority creditor's name and mailing address			
<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Columbus</u> OH 43215			
Date or dates debt was incurred <u>8/30/2017</u>		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.227 Nonpriority creditor's name and mailing address			
<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>San Diego</u> CA 92101			
Date or dates debt was incurred <u>12/1/2015</u>		Is the claim subject to offset?	
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor The Longaberger Company

Case number (if known) 18-32124-HDH

Part 2: Additional Page

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Amount of claim

3.228	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$10.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Winn Parrish School Board</u>		<u>LA 71483</u>	
<u>304 East Court Street</u>			
<hr/>			
Date or dates debt was incurred	<u>3/1/2018</u>		
Is the claim subject to offset?			
<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
3.229	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$9,845.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Wixon Inc</u>		<u>WI 53235</u>	
<u>1390 East Bolivar Avenue</u>			
<hr/>			
Date or dates debt was incurred	<u>2/2/2017</u>		
Is the claim subject to offset?			
<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
3.230	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$18,760.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Wolfe Paper Co. Inc.</u>		<u>OH 44012</u>	
<u>681 Moore Road #D</u>			
<hr/>			
Date or dates debt was incurred	<u>12/31/2017</u>		
Is the claim subject to offset?			
<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
3.231	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,250.00
<p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>			
Basis for the claim:			
<u>Wood Law Limited</u>		<u>OH 43054</u>	
<u>68 North High Street, Building B, Suite</u>			
<hr/>			
Date or dates debt was incurred	<u>12/31/2017</u>		
Is the claim subject to offset?			
<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			

Debtor The Longaberger Company

Case number (if known) 18-32124-HDH

Part 2: Additional Page

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Amount of claim

3.232	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$53,000.00
<u>YiYou Metal Co.</u>		<input type="checkbox"/> Contingent	
<u>Fuan Industrial Park, No. 578</u>		<input type="checkbox"/> Unliquidated	
<u>Binzhou Road</u>		<input type="checkbox"/> Disputed	
<u>Jiozhou</u>		Basis for the claim:	
<hr/>		<hr/>	
Date or dates debt was incurred	<u>3/1/2015</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.233	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$34,700.00
<u>Zanesville Postmaster</u>		<input type="checkbox"/> Contingent	
<u>1035 Zane Street</u>		<input type="checkbox"/> Unliquidated	
<u>Zanesville</u>		<input type="checkbox"/> Disputed	
<hr/>		Basis for the claim:	
Zanesville	OH 43701	<hr/>	
Date or dates debt was incurred	<u>12/31/2017</u>	Is the claim subject to offset?	
Last 4 digits of account number	— — — —	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor The Longaberger Company Case number (if known) 18-32124-HDH

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	Total of claim amounts
5a. Total claims from Part 1	5a. <u>\$0.00</u>
5b. Total claims from Part 2	5b. <u>+ \$9,499,598.53</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c. <u>\$9,499,598.53</u>

Fill in this information to identify the case:

Debtor name	<u>The Longaberger Company</u>	
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>		
Case number (if known)	<u>18-32124-HDH</u>	Chapter <u>11</u>

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	Warehouse Lease ends 1/26/2020	Frueh Eastpointe, LLC 4005 All American Way
	State the term remaining	<u>24 months</u>	
	List the contract number of any government contract		Zanesville OH 43701
2.2	State what the contract or lease is for and the nature of the debtor's interest	Patio Shops Ends 12/1/2019	Jim Lepi 600, 602, 606, 608 Main Street
	State the term remaining	<u>2 years</u>	
	List the contract number of any government contract		Dresden OH 43821
2.3	State what the contract or lease is for and the nature of the debtor's interest	Contract/Lease Office Space Ends 12/1/2019	Jim Lepi 601 Main Street
	State the term remaining	<u>2 years</u>	
	List the contract number of any government contract		Dresden OH 43821

Fill in this information to identify the case:

Debtor name	<u>The Longaberger Company</u>
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF TEXAS</u>
Case number (if known)	<u>18-32124-HDH</u>

Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Name

Mailing address

Column 2: Creditor

Name

Check all schedules that apply:

Fill in this information to identify the case:

Debtor Name The Longaberger Company

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

Case number (if known): 18-32124-HDH

Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets--Real and Personal Property (Official Form 206A/B)

1a. Real property: Copy line 88 from Schedule A/B.....	\$100,000.00
1b. Total personal property: Copy line 91A from Schedule A/B.....	\$13,867,813.72
1c. Total of all property Copy line 92 from Schedule A/B.....	\$13,967,813.72

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D.....

\$13,864,989.00

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F.....	\$0.00
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....	+ \$9,499,598.53

4. Total liabilities

Lines 2 + 3a + 3b.....

\$23,364,587.53

Fill in this information to identify the case and this filing:

Debtor Name	<u>The Longaberger Company</u>
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF TEXAS</u>
Case number (if known)	<u>18-32124-HDH</u>

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets--Real and Personal Property (Official Form 206A/B)*
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)*
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)*
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)*
- Schedule H: Codebtors (Official Form 206H)*
- A Summary of Assets and Liabilities for Non-Individuals (Official Form 206-Summary)*
- Amended Schedule _____
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)*
- Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 07/25/2018
MM / DD / YYYY

X /s/ John P. Rochon

Signature of individual signing on behalf of debtor

John P. Rochon

Printed name

Chairman

Position or relationship to debtor